

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mm</i>		<i>05-12-01</i>
Q.I.P.E. CLASSIFIER	<i>mm</i>	<i>32</i>	<i>5/31</i>
FORMALITY REVIEW	<i>B2</i>	<i>TC3-883</i>	<i>07-10-01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	<i>4/8/01</i>
2	<i>4/10/01</i>
3	<i>4/10/01</i>
4	<i>4/10/01</i>
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Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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